

PART B - FEE(S) TRANSMITTAL

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28316 7590 09/27/2005

BANNER & WITCOFF LTD.,
ATTORNEYS FOR DURA AUTOMOTIVE
28 STATE STREET - 28TH FLOOR
BOSTON, MA 02109

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Jennifer Sinkovich	(Depositor's name)
Jennifer Sinkovich	(Signature)
12/22/2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/614,691

07/07/2003

Michael D. Kobrehel

11361.85367

7424

TITLE OF INVENTION: EGRESS WINDOW LATCHING MECHANISM

12/23/2005 HDEHES2 00000015 500865 10614691

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
ESTREMSKY, GARY WAYNE	3676	292-074000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Banner & Witcoff LTD.

2. Mr. Peter D. McDermott

3. Dean B. Watson

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Attwood Mobile Products, Inc.

Elkhart, IN.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by check the required fee(s), or credit any overpayment, to Deposit Account Number 500865 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Dean B. Watson

Date

12/22/2005

Typed or printed name

Dean B. Watson

Registration No.

43,242

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